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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <i>(Only for new nonprovisional applications under 37 C.F.R. 1.53(h))</i>	Attorney Docket No. 1880-031249
	First Inventor Robert J. Hillard
	Title METHOD OF ELECTRICAL CHARACTERIZATION OF A ...
	Express Mail Label No. EL 971281825 US

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i>	<b>ADDRESS TO:</b> Commissioner For Patents Mail Stop Patent Application P.O. Box 1450 Alexandria VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <b>12</b> ] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>6</b> ] 5. Oath or Declaration [Total Pages <b>2</b> ] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies
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**ACCOMPANYING APPLICATION PARTS**

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| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))   |  |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement<br><i>(when there is an assignee)</i>  | <input type="checkbox"/> Power of Attorney       |
| 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>   |  |
| 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449   | <input type="checkbox"/> Copies of IDS Citations |
| 13. <input type="checkbox"/> Preliminary Amendment   |  |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><i>(Should be specifically itemized)</i>                           |  |
| 15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br><i>(if foreign priority is claimed)</i>                                   |  |
| 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122<br>(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. |  |
| 17. <input checked="" type="checkbox"/> Other: Checks for \$385.00 and \$40.00   |  |

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_/\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

☒ Customer Number or Bar Code Label **28289** or ☐ Correspondence address below  
 (Insert Customer No. or Attach bar code label here)

Name	William H. Logsdon				
	Webb Ziesenheim Logsdon Orkin & Hanson, P.C.				
Address	700 Koppers Building				
	436 Seventh Avenue				
City	Pittsburgh	State	PA	Zip Code	15219
Country	United States	Telephone	412-471-8815	Fax	412-471-4094
Name (Print/Type)	William H. Logsdon			Registration No. (Attorney/Agent)	22,132
Signature				Date	November 5, 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

 2241 U.S.P.T.O.  
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PATENT APPLICATION  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF:

ATTORNEY'S DOCKET NUMBER

ROBERT J. HILLARD

1880-031249

ENTITLED

**"METHOD OF ELECTRICAL CHARACTERIZATION OF A SILICON-ON-  
INSULATOR (SOI) WAFER"**

Commissioner for Patents  
Mail Stop Patent Application  
P.O. Box 1450  
Alexandria, VA 22313-1450

**EXPRESS MAIL CERTIFICATE**

"Express Mail" Label Number EL 971281825 US

Date of Deposit November 5, 2003

I hereby certify that the following attached paper(s) and/or fee(s):

**PATENT APPLICATION TRANSMITTAL LETTER (1 p., original and two (2) copies);  
UTILITY PATENT APPLICATION TRANSMITTAL (1 p.);  
SPECIFICATION (12 pp.) (comprising CLAIMS (3 pp.) and ABSTRACT (1 p.));  
DRAWINGS (6 sheets);  
DECLARATION AND POWER OF ATTORNEY (2 pp);  
RECORDATION FORM COVER SHEET (1 p.); ASSIGNMENT (1 p.);  
and checks in the amounts of \$385.00 and \$40.00.**

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and are addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Deborah L. Medves

(Typed name of person mailing paper or fee)

Deborah L. Medves

(Signature of person mailing paper or fee)

**PATENT APPLICATION TRANSMITTAL LETTER**

Commissioner for Patents  
 Mail Stop Patent Application  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Transmitted herewith for filing is the patent application of: ROBERT J. HILLARD

Entitled: **"METHOD OF ELECTRICAL CHARACTERIZATION OF A SILICON-ON-INSULATOR (SOD) WAFER"**

**Small Entity Status:**

☐ Small Entity Statement under 37 CFR 1.27 is enclosed  
☒ Small Entity Status is asserted for this application under 37 CFR 1.27

Enclosed are: ☒ 12 pages of Specification (comprising 3 pages of Claims and a 1 page Abstract) and 6 pages of drawings  
☒ An Assignment of the invention to: Solid State Measurements, Inc.  
☒ Declaration  
☐ Non-Publication Request Under 35 U.S.C. §122(b)(2)(B)(i)

**CLAIMS AS FILED**

	<u>No. Filed</u>	<u>No. Extra</u>	<u>Small Entity Rate</u>	<u>Non-Small Entity Rate</u>	<u>Charge</u>
Total Claims	<u>15</u>	<u>-20 = 0</u>	x \$ 9.00	x \$ 18.00	\$ <u>0</u>
Indep. Claims	<u>2</u>	<u>-3 = 0</u>	x \$ 43.00	x \$ 86.00	\$ <u>0</u>
Multiple Dependent Claim/s			+ \$145.00	+ \$290.00	\$ <u>0</u>
Basic Fee			+ \$385.00	+ \$770.00	\$ <u>385.00</u>
			Total of above Charges		\$ <u>385.00</u>
			Total Fee		\$ <u>385.00</u>

Checks in the amounts of \$385.00 and \$40.00 are enclosed to cover the filing fee and the Assignment recordal fee.

The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR 1.16 or patent application processing fees under 37 CFR 1.17 associated with this communication to Deposit Account No. 23-0650. Please refund any overpayment to Deposit Account No. 23-0650.

An original and two copies of this sheet are enclosed

November 5, 2003  
 Date

By William H. Logsdon  
 William H. Logsdon  
 Registration No. 22,132  
 Attorney for Applicant  
 700 Koppers Building  
 436 Seventh Avenue  
 Pittsburgh, PA 15219-1818  
 Telephone: 412-471-8815  
 Facsimile: 412-471-4094  
 E-mail: webblaw@webblaw.com